

M E M O R A N D U M

TO: Governor James Douglas
Vermont Health Care Reform Commission

FROM: Hunt Blair, Deputy Director for Health Care Reform

DATE: August 20, 2009

RE: State Implementation Steps Related to the Federal HITECH Act

The National Governor's Association Center for Best Practices recently released a document entitled *Preparing to Implement HITECH: A State Guide for Electronic Health Information Exchange*.¹ It provides a list of eight steps states should follow to take best advantage of the new federal HIT initiatives. The Guide's recommended action steps offer a good framework for a brief review of our work on these issues in Vermont and the progress we've made addressing them. In general, Vermont remains a state that is somewhat ahead of the pack and is well positioned to make significant advances in statewide HIE connectivity over the coming year with the help of new federal resources.

Action 1: Prepare or Update the State Plan for HIE Adoption

State staff are collaborating with VITL staff to produce a new edition of the state HIT plan. Because of the intensive integration of HIT and Health Care Reform initiatives, we are drafting an *Integrated HIT & Health Care Reform Implementation Plan*. It will be ready for initial public comment in early September.

Action 2: Engage Stakeholders

We have a variety of tactics being used to engage stakeholders:

- HCR staff convenes broad, General Stakeholders meetings monthly, distributes regular e-mail HIT-HIE & ARRA Updates, and posts additional information on the HCR web site.
- The General Stakeholders meetings will be the venue for public input on the updated state HIT Plan and policy issues as they arise.
- The HIT & Higher Education Work Group is actively developing a plan for strategic collaboration for workforce training and development and will report to the legislature by November 15.
- An Advisory Board is being established to provide direction for development of the Vermont Regional Health Information Technology Extension Center.
- The Governor has appointed a team of eight to represent the state at national meetings sponsored by the State Alliance for e-Health, including members representing Vermont hospitals, primary care practices, research and higher education, the business community, VITL, and state government.
- The Deputy Director for Health Care Reform, who is assigned as the lead for HIT & HIE for the state, will continue to engage with a variety of health care providers and organizations to ensure broad input and participation in the implementation of the state's HIT & HIE strategies.

¹ <http://www.nga.org/Files/pdf/0908EHEALTHHITECH.PDF>

Action 3: Establish a State Leadership Office

The legislature accomplished this through Act 61. The Deputy Director of Health Care Reform works directly with the Governor's office to coordinate HIT-HIE initiatives and policy implementation statewide.

Action 4: Prepare State Agencies to Participate

The OVHA Health Care Reform staff participate in multiple intra-agency efforts to ensure integration of all AHS programs and beneficiaries and the integration across state government with the state HIE and National Health Information Network (NHIN). The Deputy Director for Health Care Reform serves as liaison across state government for HIT and HIE initiatives' integration.

Action 5: Implement Privacy and Security Strategies and Reforms

VITL's Board of Directors is currently in the process of further revision to the Privacy & Security policies developed through a public engagement process last year. When those revisions are completed by VITL, they will be shared with the General Stakeholders group and incorporated into the revised state plan. In addition, state staff and VITL staff are working together with federal staff to ensure full compatibility of state level efforts with emerging federal standards.

Action 6: Determine the HIE Operational and Business Model

VITL has completed both Board and management reorganization and is now developing a new strategic plan for VITL itself, distinct from the state HIT plan. Given the substantial federal commitment to HIT and HIE evidenced in the ARRA legislation, including anticipated funding through states for support of HIE, a sustainable operational model for VITL (and other state level HIE organizations) is likely to be based, at least in part, on the need for health care providers participating in the Medicare and Medicaid programs to ship data through the HIE and on to the NHIN. Even beyond demonstrating meaningful use of HIT to obtain incentive payments from CMS, participating providers are likely to be required to report quality and other performance measures electronically. While the details of these processes will be evolving over the coming months and years, the federal policy commitment to HIE in ARRA and the HITECH Act has been emphasized by communications from ONC and CMS addressing implementation. In the near term, we expect to be able to leverage Vermont Health IT Fund resources to support VITL.

Action 7: Create a Communications Strategy

The state, in collaboration with VITL and other HIT-HIE stakeholders, is developing a comprehensive outreach and communications strategy that will be rolled out this fall that includes production of printed materials in addition to electronically distributed information and targeted outreach to the physician community, as well as communication to the general public. Communication to date has been challenging because of the extended lack of specificity coming from our federal partners, but Vermont's stakeholders are working together to ensure a unified message is disseminated as soon as more detail is available.

Action 8: Establish Opportunities for Health IT Training and Education

As noted above, both the HIT & Higher Ed. Work Group and the Regional Health Information Technology Extension Center Advisory Board are working to ensure collaboration across the state for training and education of professional, technical, and support staff for HIT implementation and operations. A full report will be completed by November 15.